

Rec'd PCT/PTO 08 AUG 2005 #4



COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled METHOD FOR PRODUCING STEREOSCOPIC IMAGES FROM MONOSCOPIC IMAGES, the specification of which

(check one) ☐ is attached hereto. It was filed on December 8, 2004, as United States Application Serial No. 10/517,557 or PCT International Application No. _____, and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 (a)-(c) or (f), or 365 (b), of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 385(a) of any PCT international application which designated at least one country other than the United States of America, listed below, and I have also identified below any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority claimed

<u>PCT/IL 03/00436</u>	<u>May 26, 2002</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(Number)	(Country)	Day/month/year filed	Yes No
<u>160131</u>	<u>Israel</u>	<u>June 10, 2002</u>	<input checked="" type="checkbox"/>
(Number)	(Country)	Day/month/year filed	Yes No
_____	(Country)	Day/month/year filed	<input type="checkbox"/>
(Number)	(Country)	Day/month/year filed	Yes No
_____	(Country)	Day/month/year filed	<input type="checkbox"/>
(Number)	(Country)	Day/month/year filed	Yes No

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

_____	_____
(Application No.)	(Filing Date)
_____	_____
(Application No.)	(Filing Date)
_____	_____
(Application No.)	(Filing Date)

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application No.)	(Filing date)	(Status: patented, pending, abandoned)
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

And I hereby appoint, jointly and severally, all of the practitioners associated with Customer Number 22440 as my attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence and telephone calls to Jeffrey M. Kadan at the address and telephone number associated with the Customer Number identified above.

1-00
Full name of sole or first inventor: WOLOWEWSKY, Kami Date: 30/06/05
Inventor's Signature: Kami WOLOWEWSKY
Residence: Eshet, 20196 D.N., Migdal, Israel
Citizenship: ISRAELI
Post Office Address: same ILX

2-00
Full name of second joint inventor, if any: ROTEM, Elia Date: 4-07-2005
Inventor's Signature: [Signature]
Residence: 18 Merod Hava'anda Simat, 34782, Haifa, Israel
Citizenship: ISRAELI
Post Office Address: same ILX

Full name of third joint inventor, if any: _____ Date: _____
Inventor's Signature: _____
Residence: _____
Citizenship: _____
Post Office Address: same

Full name of fourth joint inventor, if any: _____ Date: _____
Inventor's Signature: _____
Residence: _____
Citizenship: _____
Post Office Address: _____

Full name of fifth joint inventor, if any: _____ Date: _____
Inventor's Signature: _____
Residence: _____
Citizenship: _____
Post Office Address: _____

Full name of sixth joint inventor, if any: _____ Date: _____
Inventor's Signature: _____
Residence: _____
Citizenship: _____
Post Office Address: _____

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